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PTC/SB/21 (09-04)

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/613,482	
	Filing Date	July 03, 2003	
	First Named Inventor	Stefanie FLOHR et al	
	Art Unit	1625	
	Examiner Name	SEAMAN, D. Margaret	
Total Number of Pages in This Submission	3 pgs.	Attorney Docket Number	DEAV2002/0045 US NP

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<input type="checkbox"/> Remarks 1. "FEE ADDRESS" INDICATION FORM (1 PG.) 2. CHANGE OF CORRESPONDENCE ADDRESS PATENT (1 PG.)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	AVENTIS PHARMACEUTICALS INC.		
Signature	<i>Balaram Gupta</i>		
Printed name	Balaram Gupta		
Date	April 28, 2005	Reg. No.	40,009

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PTO/SB/123 (09-03)

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Patent Number	6,841,556
Issue Date	January 11, 2005
Application Number	10/613,482
Filing Date	July 03, 2003
First Named Inventor	Stefanie FLOHR, et al
Attorney Docket Number	DEAV2002/0045 US NP

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Patentee.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).Attorney or Agent of record. Registration Number Balaram Gupta

Typed or Printed Name Balaram Gupta, Reg. No. 40,009

Signature Balaram GuptaDate April 28, 2005Telephone 908-231-3354

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/47 (07-09)

Approved for use through 05/31/2006. OMB 0651-0016

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Request for Customer Number (PTO/SB/125) attached hereto

in the following listed application(s) for which the Issue Fee has been paid for patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
6,841,556	10/613,482

Completed by (check one):

Applicant/Inventor

Balaram Gupta
Signature

Attorney or Agent of record 40,009
(Reg. No.)

Balaram Gupta, Reg. No. 40,009
Typed or printed name

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

908-231-3364

Requester's telephone number

Assignee recorded at Reel Frame Date

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